Power of Attorney

l (mandator):						
Name:						
Address:		Postal-code:	C	City:		
Tel.:	E-mail:			CPR-no.:	Police-no.:	
iei.	E-IIIdii.			CPR-110	Police-110	
Hereby provide power of attorney to (proxy holder):						
Name:						
Address:		Postal-code:	С	City:		
Tel.:	E-mail:			CPR-no.:		
The parson with this power of atternowis allowed to take care of all correspondence regarding my case at						
The person with this power of attorney is allowed to take care of all correspondence regarding my case at Europæiske ERV. The above person is my party representative, and is now acting on my behalf.						
This power of attorney is related to case no.:						
With this power of attorney, I hereby accept that all information regarding my case will be made to the proxy holder.						
This power of attorney ceases when Europæiske ERV has completed the case in question. At any time I can with-draw the power of attorney by giving notice to Europæiske ERV.						
diaw the power of attorney by giving notice to earopæiske erv.						
Place/Date						
Signature (mandator)						
Please send this power of attorney with your original signature to Europæiske ERV, either by e-mail or by mail.						



Tel. 33 25 2525 Fax 70 10 60 40